



THE MOST EXCELLENT GRAND CHAPTER OF HOLY ROYAL ARCH MASON OF  
NORTH CAROLINA AND JURISDICTION, INC.

NATIONAL BACKGROUND CHECK CONSENT FORM

**A NATIONAL BACKGROUND CHECK IS REQUIRED FOR ALL APPLICATIONS FOR  
MEMBERSHIP, APPLICATIONS FOR REINSTATEMENT**

APPLICANT NAME \_\_\_\_\_

APPLICANT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_, NC ZIP CODE \_\_\_\_\_

APPLICANT PHONE NUMBER HOME (\_\_\_\_\_) \_\_\_\_\_

APPLICANT PHONE NUMBER CELL (\_\_\_\_\_) \_\_\_\_\_

APPLICANT EMAIL ADDRESS \_\_\_\_\_

YOU WILL RECEIVE AN EMAIL TO INITIATE YOUR BACKGROUND CHECK. YOU  
WILL BE ASKED TO PROVIDE KEY INFORMATION TO COMMENCE THIS PART OF  
THE PROCESS. THE MEMBERSHIP, REINSTATEMENT AND/OR RESTORATION  
PROCESS CANNOT BE COMPLETED WITHOUT A NATIONAL BACKGROUND  
CHECK.

I, \_\_\_\_\_, CONSENT TO AND UNDERSTAND  
THAT A NATIONAL BACKGROUND CHECK IS REQUIRED WITH MY APPLICATION  
FOR MEMBERSHIP, APPLICATION FOR REINSTATEMENT.

\_\_\_\_\_  
DATE \_\_\_\_\_  
PRINTED NAME AND SIGNATURE OF APPLICANT